



Report of the Mature Adults Commission Jack Doyle, County Executive



This report was commissioned by the County Executive to research the best way to support Monroe County's growing population of older adults. The Monroe County Mature Adults Commission was formed to study the complex issues and the following report is an outline of its findings and its recommendations on how we can help Monroe County residents as they "Age Well."

April, 1998

Mature Adults Commission



Jack Doyle County Executive

Mature Adults Commission

Fran Weisberg - President, CEO of Lifespan

Lorraine V. Anderson - Director, Monroe County Office for the Aging

Robert McCann M.D. - Medical Director, Independent Living for Seniors

Al Giordano - Rochester City School Teacher (retired)

Nancy Giordano - Pastoral Associate, St. Joseph's Church (Penfield)

Kenneth Naples - President of CCN Inc. of VIA Health

Gary Shaw - Director, River Edge Manor at Episcopal Church Home

Debra Schipper - Nurse Practitioner, Hill Haven Nursing Home

Pat Sams - Sweden Senior Center Participant

Chris Barthel - Sweden Senior Center Participant

Carol Deinhardt - Deputy Director for Medical Assistance, Department for Social Services

Jean Summers - Lifespan, Financial Services & Guardianship Representative

Eli Rudin - Nursing Home Administrator (retired), and Member Corporate Board Valley Manor

Alice Ennis - United Way, Community Investment Associate for Helping Seniors William J. Hall M.D. - Vice Chair, Department of Medicine, University of

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Dandrea Ruhlmann, Esq. - Member, Monroe County Office for the Aging Advisory Board Rev. James Cherry - Pastor Aenon Baptist Church

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Betty Perkins-Carpenter

Pastor Carol Gomez

Father Larry Murphy

Rabbi Laurence Kotok

I created the Mature Adults Commission six months ago to advise me on policy issues related to the growing population of senior citizens in our community. This report of their findings and recommendations maps out a sensible and proactive approach to making the most of our fastest growing resource - older residents.

The task we gave to the Commission was not an easy one, for they were asked to come up with creative and innovative solutions to some tough problems, and do it within existing resources. That may seem unreasonable, but the last thing we should do is craft solutions that mean higher property taxes, which disproportionately harm senior citizens.

I commend the commission for its efforts, and ask the commissioners to join with me and county staff in the implementation phase of the recommendations.

Mature adults have given much to our community over the years, and they still have a great deal left to give. We owe it to them to be responsive to their needs, and to recognize them as an important resource for our future.



Jack Doyle
County Executive

As Chairperson of the Mature Adults Commission, I have been honored to play a role in the drafting of a plan that recognizes the value of older adults and that begins the process of crafting a comprehensive plan for the "age wave." Never before in our history have so many lived so long. And with this increasing longevity, today's older adults face more life transitions and more challenges than ever before.

But, thanks to the leadership of County Executive Jack Doyle, our county is ahead of the planning curve by planning for these life transitions and challenges. By bringing together an array of individuals from the public sector, private sector, health care field, religious leaders, retirees and citizens of our county, we have established a collaboration of individuals who analyzed the changes and ramifications of our young country growing older.

"Aging Well" is more than a catchy slogan, it is a philosophy that gives older adults the resources to age with choice, independence and dignity. It is redefining the old stereotypes of aging by acknowledging the rich resources of an aging society while examining services that may be needed to promote independence.

I want to personally thank the members of the commission and the sub-committee members for their diligence, hard work and commitment to developing this plan. I also want to especially thank County Executive Jack Doyle for his foresight in calling our county to proactively plan for an aging society.

Fran Weisberg
President, CEO of Lifespan

Mature Adults-Our Fastest Growing Resource

A national and local transformation is underway. Thanks to increasing longevity, the population of those 75 and older is the fastest growing segment of our community. Almost 46,000 county residents will be 75 or older by the year 2000, an increase of 7,000 since 1990. By 2000, the number of persons 85 and older will have increased by 25 percent since 1990.

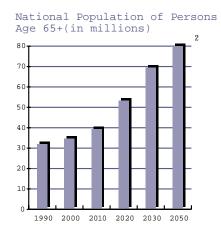
Yet, these population changes are only the tip of the iceberg. During the next 50 years, increasing longevity and the aging of the baby boomers will transform the characteristics of our nation and Monroe County. By 2050, 80 million Americans will be 65 or older (compared to 33 million in 1996). Eighteen million Americans will be 85 or older (compared to 3 million in 1996).

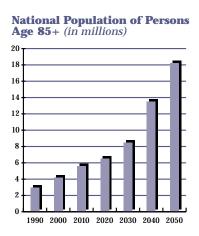
In contrast to prevalent myths and stereotypes, the population of older adults is not homogenous. Today, the majority of older adults lead active, productive lives. Their experience can and should be utilized to a greater extent in our community. In fact, some emerging data suggests that limitations in activities due to disabilities may have decreased in the 1980s - even among the oldest old.

However, there is also ample evidence that the percentage of the population experiencing activity limitations increases with age. Of all persons age 65+ it is estimated that 20 percent have chronic self-care or mobility limitations that curtail their ability to live independently. The inability of persons to prepare their own meals, grocery shop, transfer from bed to chair, toilet, self-medicate, etc. dictates the need to locate supportive services that can help an older adult maintain his/her independence.

National Statistics

In 1996, 33.9 million (12.8% or one in eight) Americans were 65 or older. By 2020 it is predicted that one in six Americans will be 65 or older, due to





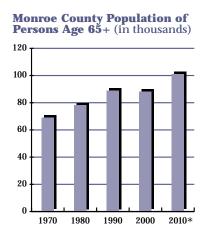
² U.S. Census Middle Series Projections

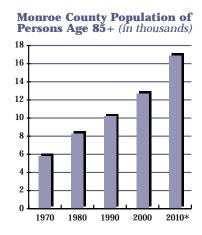
increasing longevity and the aging of 76 million baby boomers. By 2050 the ratio will be one in five (Compared to one in 25 in 1900.)

The oldest old, those 85 and older, are the fastest growing segment of the population. The number of persons age 85+ will more than double from 1990 to 2020 from 3 million to 6.5 million. By 2050, 18 million Americans will be 85 or older.

Monroe County Statistics

Monroe County population statistics mirror national data. In 1990, there were 89,000 persons 65+ (12.4% of the total population). Both nationally and in Monroe County, the total number of persons 65 - 74 was projected to decrease in the ten years between 1990 and 2000 due to lower birth rates during the depression. However, the number of those 75+ and 85+ has and will continue to grow. Almost 46,000 county residents will be 75 or older by the year 2000, an increase of 7.000 since 1990.





^{*} Monroe County projection by LIFESPAN based on national U.S. Census Middle Series

Profile: Older Adults

National Statistics

A. Life Expectancy

Life expectancy at birth in 1900 was 47 years.³ By 1996, life expectancy had jumped to 76.1 years.⁴ Today, persons reaching age 65 can expect to live another 17.4 years.

⁴A Profile of Older Americans, 1997, AARP and U.S. Administration on Aging

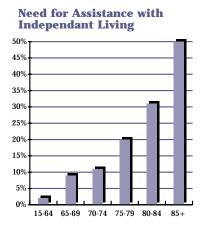
B. Living Arrangements

Most persons age 65+ live with family members. However the incidence of living alone increases with age, especially for women. Thirty percent of all non-institutionalized persons 65+ live alone. Just 5% of persons 65+ live in nursing homes, but 25% of persons 85+ live in nursing homes.

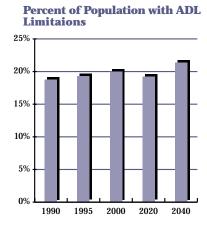
C. Health Status

Seventy percent of persons age 75+ consider themselves to be in good health.⁵ However, data shows that as persons live longer, long-term chronic illness, disability and dependency become more likely. Of the three million Americans who are 85+, 30% have Alzheimer's.⁶

The need for assistance with Activities of Daily Living and Instrumental Activities of Daily Living (ADL/IADL) increases with age: ADLs and IADLs are measures of the ability to live independently i.e. ability to bath, eat, toilet, transfer, handle finances, shop, prepare meals, take medications).⁷



Although there is some evidence that fewer older adults will have ADL/IADL needs as they age, experts still forecast that about 20% of the 65+ population will have chronic self-care limitations.



Current Data and Projections of Noninstitutionalized Population 65 and older with ADL limitations: 1990 - 2040.8

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⁵National Center for Health Statistics, Health, United States, 1993

⁶U.S. Census Bureau and National Institute on Aging

⁷U.S. Census Bureau

⁸Administration on Aging. Calculated on basis of population.

Health Care Cost:

Nationally, persons 65+ accounted for 36% of health care expenditures in 1987. Averaged \$5,360 per person, compared to \$1,290 per person for younger persons.

C. Financial Status

Nationally, 3.4 million (10.8%) persons 65+ were living below the poverty level in 1996.9

D. Housing

More older adults are opting to retire in their home regions to remain near children, relatives and friends.¹⁰

- Just 4.5% of retiree's want to leave their home regions.
- 11.5% want to move elsewhere in the region.
- 84% want to stay in their home community.
- Of those who relocate to Florida, 75% eventually return to their home regions.

Profile: Monroe County's Older Adults

The profile of Monroe County's older adults very much mirrors national data - except for poverty rates.

A. Living Arrangements

- 30% of those 65 and older live alone (25,600 residents in 1990).
- Four of every five persons living alone are women.

Geographic Breakout:

- 70% of persons 65+ live in Monroe County suburbs. Projected to increase to 80% by 2000.
- Greece has highest numbers (15,000 60+). Irondequoit and Brighton highest percentages (25% of residents 60+).

B. Health Status

Number of Persons with *Self-Reported* Mobility of Self-Care Limitations (Monroe County):¹¹

- **65**+ 15,214 (or 18.4%)
- **75**+ 9,742 (or 29.6%)

(Mobility limitation: a health condition that lasted 6 or more months and which made it difficult to

⁹Older Americans Report, 10/3/97

¹⁰ Marketing Directions Associates

¹¹ Source 1990 U.S. Census for Monroe County

leave the home alone. Self-Care Limitation: A health condition that lasted six or more months and which made it difficult to take care of their own personal needs).

C. Financial Status

Just seven percent of those 65+ in Monroe County live below the poverty level, as compared to 11% nationally.

Raw Numbers Poverty Level or Below:12

- **60 64** 1,779
- **65 74** 2,854 (or 5.6%)
- **75**+ 3,088 (or 8%)
- Of those living below the poverty level, 77% were women.
- Of those living below the poverty level, 66% lived alone.
- Disproportionately high poverty among sub-groups (city residents 14%, African-Americans 25%)
- 13,000 *or 23%* of households headed by persons 65+ had incomes of \$10,000 *or less*.
- Median income for men 65+ is \$14,548.
- Median income for women 65+ is \$8,189.
- 66% of those 65+ own their own homes (of those 65+ in suburbs, 75% are home owners vs. 56% in the city).

Profile: Caregivers

National Statistics

The average caregiver is a married woman age 45 - 57 who is providing care for a parent or parent-in-law. Sixty percent are employed and 54% have made changes at work to accommodate their caregiving roles. ¹³ Caregiving spouses tend to be in their late 60s or early 70s.

- According to recent studies one in four to one in five mid-life adults (age 34-65) are involved in caregiving situations.¹⁴ According to one recent study, more than half of baby boomers and almost 2/3 of those age 55 - 64 had provided care.¹⁵
- Tripling of family involvement in caregiving during last decade.
- Likelihood of becoming a caregiver increases with age.

6

¹² U.S. Census 1990

¹³ American Demographics Magazine, September, 1997

¹⁴ National Survey of Families and Households, 1987

¹⁵ NCOA/John Hancock Study, 1996



Mature Adults Commission: Recommendations

April, 1998

ACCESS AND EDUCATION RECOMMENDATIONS

Recommendation #1: Information and Referral

It is apparent to the Access and Education Committee of the Monroe County



Mature Adults Commission that county residents do not know where to call for information and assistance—whether the questions are about housing, transportation for grocery shopping, recreational activities or long term care placement. Therefore, the sub-committee's foremost recommendation is the enhancement of one telephone number access to services and systems for older adults. This well-publicized number should be able to serve both well, active older adults and the frail elderly and their caregivers. Publicizing the phone number will require massive public relations efforts and use of television and radio advertising, billboards, direct mail, brochures and posters.

Implementation Strategy:

The Committee recommends that the County Executive or his representative bring together representatives from current access points including Eldersource (LIFESPAN and Catholic Family Center) Lifeline and Elderline (Monroe County Office for the Aging, Red Cross) along with the primary funders including the United Way, Rochester Gas & Electric, and the county administration to facilitate the creation of a less fragmented, more unified access system in public/private partnership. The Committee also recommends that an Elder Council be created to evaluate both public relations/outreach and gaps in services identified through the access point.

Recommendation #2: Directory of Information

The Committee on Access and Education also recommends the publication of a handbook of all elder services, which could also appear on Monroe County's web site, for distribution and use by county residents. This directory should clearly and concisely list all available options - from chore services to transportation.

Implementation Strategy:

The County Executive or his designee will bring together representatives from organizations that currently publish resources Eldersource, LIFESPAN, Greater Rochester Area Partnership for the Elderly (GRAPE), Monroe County Office for the Aging (MCOFA) and the National Council of Jewish Women, Greater Rochester Section, Inc. as well as others to collaboratively pool and increase finan-

cial resources in order to create the handbook and develop a strategy for its distribution. The Committee further recommends that the phone number for the central access point be prominently featured on the front cover of the handbook.

Recommendation #3: Maintaining Independence

Non-Medical Support Service: Utilizing Volunteers

Given the great need and acknowledging limited financial resources, the Committee on Access & Education recommends tapping the huge, underutilized pool of 55+ volunteers, linking them with college-age and high school youth to expand current programs and create new ones that help older adults maintain their independence.

Implementation Strategy:

1. Monroe County Office for the Aging will lead a campaign to enlist volunteers to specifically work on the issues mentioned in the recommendation. This would be done with other elder service providers in order to maximize the effort. Corporations, religious organizations, labor unions and their retiree groups will provide a major focal point for this organized volunteer effort. The County Executive, Retired and Senior Volunteer Program (RSVP) and MCOFA staff will design an organized effort to solicit corporate support.



- 2. The Rochester/Monroe County Youth Bureau and School Districts throughout the county, in harmony with MCOFA, will attempt to fill the long waiting lists of already existing programs.
- 3. Collaborate with existing volunteer programs (RSVP, Red Cross, Volunteer Connection) in the coordination of a true "community effort."

HOUSING COMMITTEE RECOMMENDATIONS

Recommendation #1: Revision of the 1989 Elderly Housing Study

The Committee believes that it is vitally important to update and revise the 1989 Elderly Housing Study that was undertaken by the County of

Monroe's Department of Planning. This report contains an inventory of available housing types in Monroe County. However, since its publication, the face of housing for older adults has changed dramatically. This inventory should be updated and should clearly categorize all senior housing types.

- The housing study should take a critical look at present and future needs in the county. A vital part of the market study should examine current housing types and attempt to project future needs both demographically and geographically.
- While many public programs attempt to address the development of low income housing needs, and while the marketplace fulfills highincome housing needs, there are not sufficient programs/funding sources that address moderate income housing needs. Therefore, the Committee recommends that the county place special emphasis on locating sources of funding for this moderate income segment.

Implementation Strategy:



The Housing Committee believes that the County Planning Department should facilitate the development of the inventory and market study utilizing present resources such as the Eldersource computerized housing directory and the city/county study of rental property. The committee believes that the study should not duplicate or replace present activities, but rather expand and enhance present efforts to insure a focus on elder housing alone.

The Committee recommends that the study be completed within one year of final approval by the County Executive, and calls for the formation of a Governance commission which would meet quarterly to oversee the implementation of the study.

Recommendation #2: Creation of a Consumer Clearinghouse

The Committee further recommends that the county identify a consumer clearinghouse on housing for older adults. The clearinghouse should:

- offer the consumer a simple brochure that explains the various housing levels and types throughout the county and
- publish a comprehensive housing directory.

Implementation Strategy:

The Committee suggests that the consumer clearinghouse be completed within six months of final approval by the County Executive. The Committee believes that the creation of the guide should be facilitated by the Monroe County

Office for Aging working in concert with Eldersource, the Housing Council, and other housing umbrella organizations such as the real estate board. The Committee believes that this directory should be developed in concert with the broad Elder Services directory being recommended by the Access and Education Committee and the final product should appear on Monroe County's web site.

Recommendation #3: Elder Friendly Homes; Enhancing Home Modification Programs

The Committee on Housing recognizes that older adults prefer to remain in their own homes as long as possible. This Committee recommends identifying and expanding current programs and obtaining additional resources that would fund a volunteer effort to keep mature adults living independently by installing grab bars, ramps, first-floor baths and doing emergency home repair designed to assist elders.

Implementation Strategy:

- A Monroe County/City of Rochester joint effort, utilizing the departments and personnel at their disposal to coordinate an effort which supports a neighbor-helping-neighbor campaign, and programs such as Project Care, Project Heart, and Get Smarts, as well as all other programs designed with "elder friendly homes" in mind.
- Encourage the private sector (business & industry) in the donation of in-kind services and skills to assist in renovations.
- Seek funds from the Division of Housing & Community Renewal, Capital Projects Budget, Housing Opportunities for the Elderly (HOPE) that would assist in this community effort.
- This entire effort will be coordinated by Monroe County Planning & Community Development Department.

VISION OF AGING WELL

RECOMMENDATION #1: OLDER ADULT REPORT CARD

The concept of "Aging Well" is subject to individual interpretation, but has general attributes. These include:

- Maintenance of physical and mental health to the fullest extent possible.
- Sustained relationships which give meaning and purpose to life.
- · Growth of "inner life" in the presence of disability.
- Participation in development of policy and decision-making in affairs concerning elders.



The "Aging Well" Committee fundamentally believes that the entire community benefits when its citizens age well. In order to promote appropriate initiatives and design new programs to support aging well, the community must know where to begin. Therefore, our Committee places its highest priority on the support, completion and implementation of the Monroe County Older Adult Report Card of the Community Health Improvement Project, initiated by the Monroe County Health Department.

Implementation Strategy:

The Committee recommends the County Executive move this report card on Older Adults in Monroe County to the top of the agenda for the Community Health Improvement Project and provide the Monroe County Health Department with whatever resources are necessary for its completion. Furthermore, the County Executive should work to insure this report card and its subsequent "priorities for action," which will be obtained through a community process, take a holistic approach to wellness rather than a clinical focus. Next, this Committee encourages the County Executive to be directly involved in sharing this report and its action steps with the citizens of Monroe County through all methods of communication available to his office.

RECOMMENDATION #2: THE COUNCIL OF ELDERS

Prioritizing and implementing the recommendations of the "Older Adults in Monroe County Report Card," along with assisting the County Executive in



the execution of the recommendations from the County of Monroe Mature Adults Commission will require significant input and activity from elders and elder providers. Therefore, the Committee on Aging Well recommends the County Executive create, appoint and convene a "Council of Elders" that would assist the County Executive in providing regular oversight for this Commission's (COMMAC) recommendations and continuously identify the needs of mature adults in Monroe County. In addition, the Council of

Elders would serve as a liaison to other political entities on issues involving older adults, along with addressing the issue of service gaps, not only for this

population, but also for the programs and services with children, youth and families which might directly or indirectly impact older adults.

Implementation Strategy:

The County Executive would appoint 12-15 people from a variety of disciplines, such as the religious community, service provider groups, MCOFA, the medical community, housing and transportation, providers, education, law enforcement, and senior centers representatives. These



appointees would be older adults, at least 50 years of age. The Council of Elders would encourage the establishment of "Elder Circles" for each city neighborhood, town and village of the County and further existing relationships in settings such as religious congregations, ethnic clubs, senior centers, etc.

RECOMMENDATION #3: AGING WELL MEDIA PROGRAM

Older adults and the community at large would benefit from increased communication and education. Therefore, the Committee on Aging Well recommends the County Executive use the influence of his office to create and promote an "Aging Well" public and cable television program that would offer information on topics such as wellness accessing services the aging process, volunteerism, etc.

Implementation Strategy:

The County Executive use the influence of his office to encourage public television and community access channels to regularly schedule an "Aging Well" program. The County Executive, through the Council of Elders and/or other County resources, would identify 10-12 older adults from our community with expertise in communications and empower them to produce a regular program on aging well. The County Executive would encourage older adults throughout the community to lobby with their local community access stations to offer a set time for broadcast of the programs that would be produced by the "Aging Well" network.